

MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Final
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Meeting Name: IPRS Core Team Meeting
Facilitator: Eric Johnson, DMH
Scribe: Marcus Jeffers
Date: 06/13/2007
Time: 10:30 – 11:30 a.m.
Location: Hargrove, Conference Room D

IPRS Core Team Attendees:

- ✓ Rick Kretschmer
- Sarah Harris
- ✓ Cheryl McQueen
- ✓ Eric Johnson
- Gary Imes
- Joyce Sims
- ✓ Rick DeBell
- ✓ Thelma Hayter
- ✓ Marcus Jeffers

Others:

- Tim Sullivan
- ✓ Jamie Herubin
- Sandy Flores
- ✓ Mike Frost
- ✓ Myran Harris
- Chris Ferrell
- ✓ Deborah LeBlanc
- Cathy Bennett

Attendees:

- Alamance-Caswell
- ✓ Albemarle
- ✓ Catawba
- ✓ Centerpoint
- ✓ Crossroads
- Cumberland
- ✓ Durham
- ✓ Eastpointe
- ✓ Edgecombe-Nash
- Five – County MHA
- ✓ Foothills
- Guilford
- ✓ Johnston
- ✓ Mecklenburg
- ✓ Neuse
- ✓ New River

- ✓ Onslow-Carteret
- ✓ OPC
- ✓ Pathways
- ✓ Pitt
- Roanoke-Chowan
- ✓ Rockingham
- ✓ Sand hills Center
- ✓ SE Center
- ✓ SE Regional
- ✓ Smoky Mountain
- Tideland
- ✓ Wake
- ✓ Western Highlands
- ✓ Wilson-Greene

Attendees:

Item No. Topics

1. Roll call
2. Please mute phones or refrain from excess activity to help with communications. Please state your name and which “area program” you are from when you speak. **Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.**
3. Upcoming Check-writes (cut-off dates) –
4. Agenda items
 - **Last Checkwrite for Fiscal Year 2007**
 - Close out Target Pop Groups
 - CIS provider number and NPI
 - Beta Test (NPI) Requirements review
 - 100 records/LME/submission; Format Test; Full Cycle Run, 835
 - **Update scheduled termination: TBD**
 - IPRS/MMIS Questions or Concerns
5. DMH and/or EDS concluding remarks
 - a. For **North Carolina Medicaid** claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.
 - i. Physician phone analyst (i.e. Independent Mental Health Providers)-4706
 - ii. Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4707
6. Roll Call Updates

Next Meeting: June 20, 2007

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc.
Call the IPRS Help Desk – 1-800-688-6696, ext 53355 or 919-816-4355
, M-F, 8 a.m.-4:30 p.m., excluding holidays.

IPRS Question and Answer email address – iprs.qanda@ncmail.net

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	Roll Call
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which "area program" you are from when you speak. Also, please do not place IPRS Core Team call on hold because of potential distraction to call discussion.
3.	<u>Upcoming Check-writes</u> (cut-off dates) June 14, June 28 (start of Fiscal Year '07-'08); July 5
4.	<p><u>Agenda items</u></p> <ul style="list-style-type: none"> <p><u>Last Checkwrite of Fiscal Year 2007</u> Travis Nobles stated that the last checkwrite of this fiscal year is 6/14/2007. There has been no more confirmation of claims being paid out of this fiscal into the next fiscal year. At this point the Timely Filing date is still the last checkwrite in October.</p> <p><u>Close out Target Pop Groups</u> Travis continued with a reminder that everyone needed to remember to close out target pop groups to eliminate claims unnecessarily pending for Pop Groups that have zero remaining balances in all of their accounts.</p> <p>Q: Tommy (Sandhills): – Can you close fund reserves too, or is it just the target pops? A: Cheryl (DMH) – It's just the target pops. Q: Tommy (Sandhills): – So you can't close the fund reserves? A: Cheryl (DMH): – No, you can't close a specific account. However; if there are multiple accounts in a pop group the system will automatically, if the first account is out of money, go down and look at the next account for that pop group. It won't pend it will do all that in the same checkwrite. The only time that the claim will pend is if the client is enrolled in multiple pop groups and the claim is eligible for both of those pop groups. If the first one in the hierarchy is out of money then the claim will pend and will try to go to the next pop group in the following checkwrite. So this is what we are trying to help you to avoid by closing out pop groups. Q: Tommy (Sandhills): – Could you review over that process for us please? A: Cheryl (DMH) – The process to close target pops or what was just said? Q: Tommy (Sandhills): – To close a target pop. A: Cheryl (DMH): – To close a target pop you just have to send an email to Jay Dixon, and his email address is jay.dixon@ncmail.net and also copy on that Rick Debell. Just tell them which LME you are from and which pop groups you would like to have closed. Q: Tommy (Sandhills): - Do you think if this is done today, in terms of tomorrow being the last checkwrite, that they can put this in place. A: Cheryl (DMH): - Yes, it actually won't affect anything until the checkwrite starts on Friday. So if you send it in today that should plenty of time for them to get it in before the checkwrite begins this weekend. Q: Tommy (Sandhills): - Ok thank you very much!</p> <p><u>CIS provider number and NPI</u> Just as a reminder, Cheryl included that DMH is asking that for all endorsed providers, when NPI information is sent to Medicaid, they need to include service level numbers in addition to the core number. So any alpha suffixed number needs to be sent with an associated NPI number. It can be the same NPI number as the core number, that's up to the provider(s). Maybe they don't realize that this is what needs to happen. But we need the help of all the area programs to remind them that this needs to be done.</p>

- **Beta Test (NPI) Requirements Review**

Cheryl continued by saying that the NPI 837 beta test process is still open and available. There is still not a date that NPI will be implemented other than May of 2008. There is a meeting scheduled with DMA at the end of June. Hopefully more information will be revealed at this point and will be passed on to area programs.

- **IPRS/ Medicaid Questions & Concerns:**

Q: Kelly (Durham): – I have a question about the 835's. There are several times during the calendar year where the 835 is available the day after the cutoff for the checkwrite cycle. I had sent a message to Tara Larson a couple months ago and I hadn't gotten anywhere with it. The IPRS 835 is available before the checkwrite money is released. So in theory the Medicaid money could be as well. In having the 835 ready the day after the checkwrite just increases the amount of errors that the providers submit to Medicaid. Because you can have duplicates; errors that can't be resolved. Has anyone thought about that?

A: Cheryl (DMH): We can't answer that question in this room because most of the people in here are IPRS and not Medicaid. But we can take that concern to DMA and see if they are willing to explore it.

Q: Kelly (Durham): Ok, thanks. Is there anymore update on the special carriers that can route to IPRS?

A: Cheryl (DMH): No

Q: Kelly (Durham): Any movement on that?

A: Cheryl (DMH): Not a whole lot right now, no.

Q: Kelly (Durham): Ok

Q: Kim (Neuse): I apologize for having to ask you all to repeat an issue; but what was the issue with closing out target pops.

A: Travis (DMH): Just a reminder that you need to close out target pops. We had talked about it last week. Rick had mentioned it.

Q: Kim (Neuse): You're talking about when funding is gone?

A: Rick (DMH): When the fundings gone so it doesn't pend and hold it over to the next checkwrite.

Q: Kim (Neuse): Gotcha; I was thinking that it was something different. Ok thank you.

Q: Kim (Neuse): I have another question. I know we've covered this about the LMEs having NPI numbers. But we are still having issues from the providers that call us. You know, the independent practitioners, and Medicaid letting them know we need the new center's NPI number? Did we resolve that it was not necessary? If that is the case, who do we need to contact? Or is it just the practitioner we should tell to resubmit with the 3404 number and hope that it goes thru?

A: Cheryl (DMH): When they are putting you down as the referring provider?

Q: Kim (Neuse): That is correct. We're having problems with the independent practitioners who call us for a referral numbers.

A: Cheryl (DMH): And they are having claims deny?

Q: Kim (Neuse): Yeah, Medicaid has sent back a document to them telling them that they need the NPI number from the LME.

A: Cheryl (DMH): Are they trying to get claims paid with an NPI number on it?

Q: Kim (Neuse): I think so. I think what is happening is when they call us for a referral, like Carolina Access. We give them our referral number as 34049XX.. or whatever.

A: Cheryl (DMH): Right, which is what you are suppose to do because you are divested.

	<p>Q: Kim (Neuse): They are then filing a claim that has the 3404 referral number on the claim.</p> <p>A: Cheryl (DMH): Ok</p> <p>Q: Kim (Neuse): I don't know if they are getting a denial or some type of correspondence, but they said that their correspondence tells them that Medicaid tells them that Medicaid wants the NPI number and not the 3404 number.</p> <p>A: Cheryl (DMH): Ok, and we can follow up with Medicaid on that part of it.</p> <p>Q: Kim (Neuse): Ok. Would you please?....</p> <p>A: Cheryl (DMH): All I can really say is that you need to continue to submit with the "3404" number. Now, if they are getting denials....</p> <p>Q: Kim (Neuse): For other reasons right, that's something different.</p> <p>A: Cheryl (DMH): Yes</p> <p>Q: Kim (Neuse): Yeah, ok I understand that. Thank you.</p> <p>Q: Sandy (Crossroads): I have one question about the ASTER target pop group. The 90 day period crossing fiscal years. Can you remind me what the guidelines are with that?</p> <p>A: Cheryl (DMH): Yes, counted in the fiscal year in which it begins. If they have an enrollment period that occurs in this current fiscal year. If that carries over to the upcoming fiscal year starting in July, that counts as one of the admissions into the current fiscal year. So in the fiscal year '07 – '08 they would still be eligible for two more enrollment periods in the ASTER pop group.</p> <p>Q: Sandy (Crossroads): Ok, and we don't have end date June 30, and begin again if the 90 day period has not been fully utilized?</p> <p>A: Cheryl (DMH): Correct. You do not have to end-date on June 30. The eligibility period can carry over fiscal years.</p> <p>DMH and/or EDS Concluding Remarks:</p> <p>For North Carolina Medicaid claim questions / inquires please call EDS Provider Services at 1-800-688-6696 or 1-919-851-8888 and enter the appropriate extension listed below or 0 for the operator.</p> <ul style="list-style-type: none"> ○ Physician phone analyst (i.e. Independent Mental Health Providers)-4706 ○ Hospital phone analyst (i.e. Enhanced Service Providers / LMEs) - 4707 <p>Roll Call Updates</p>
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